# SOUTH CAROLINA DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

# Pervasive Developmental Disorder Waiver and Pervasive Developmental Disorder State Funded Program: A Quick Reference Guide for Service Coordinators

#### **ELIGIBILITY CRITERIA**

In order to be eligible for services through the Pervasive Developmental Disorder (PDD) Waiver, children must:

- Be ages 3 through 10 years.
- Be diagnosed with a Pervasive Developmental Disorder by age eight years.
- Meet Medicaid financial criteria or provide documentation of financial ineligibility for Medicaid.
- Meet ICF/MR Level of Care medical criteria (as determined by the DDSN Consumer Assessment Team for this program).

Children who do not meet ICF/MR Level of Care, but meet all other eligibility requirements may receive services outside the waiver through the Pervasive Developmental Disorder State Funded Program if funding is available. However, the child and parents/guardians must comply with all other program requirements and stipulations.

To maintain eligibility for services via the PDD Waiver or the PDD State Funded Program:

- Services must be received within 30 days of enrollment into the PDD waiver/State Funded Program.
- The child must receive at least one waiver service each month documented in the participant's record. A participant who has not received a documented service at least monthly shall be discontinued from the waiver. Service Coordination will satisfy the requirement of a documented monthly service.
- The Service Coordinator must receive documentation monthly from the Early Intensive Behavioral Intervention (EIBI) provider beginning with the first month period following the initiation of service. Failure to provide this information may prevent future services.
- Proof of progress from the initial baseline derived from the preliminary assessment tool must be provided by the EIBI provider to the child's Service Coordinator and the Autism Division every six months. Lack of progress at a six month interval will initiate a 6 month probationary period to determine appropriateness and continuation of EIBI services.

March 1, 2007

#### APPLYING FOR SERVICES

The process of applying for services through the PDD waiver will consist of Screening, Intake, Service Coordination, Level of Care Determination, and Slot Allocation and Enrollment.

# Screening

Screening is the process initiated by the child's parent/legal guardian via the PDD Intake and Referral Call Center. The PDD Intake and Referral call center serves as the single entry point for participation in the PDD waiver for all children not currently served by DDSN. The PDD Intake and Referral Call Center provides the caller with a brief overview of EIBI services. A trained screener asks the caller a series of questions to help determine if the child is appropriate for a referral.

Families interested in receiving EIBI services must call the PDD Intake and Referral toll free number (1-888-576-4658) and leave their name and phone numbers. The screener will have 48 hours to return all calls. Calls will be returned in the order in which they were received.

Upon making contact with a family, the screener will ask a series of questions to determine if the referral is appropriate. If responses indicate that the child may be eligible for EIBI services through the PDD Waiver, the screener will assist the parent through the intake process.

If responses rule out eligibility, the screener will confer with the Autism Division for confirmation. If the Autism Division concurs with the screener the process will end. If this occurs, the family/legal guardian will be informed of their right to appeal per the DDSN/DHHS Medicaid Reconsideration/Appeal Process. If the Autism Division does not concur, the child will continue through the process.

If a child is currently eligible for DDSN services and a parent/legal guardian is interested in receiving EIBI services through the PDD Waiver, the parent/legal guardian should contact the child's Service Coordinator and request that the child go through the intake process for the PDD Waiver. This process is explained in this document on page 5 of the Service Coordination section.

# Intake

Intake is the process in which specific documents are signed by the parent; records to support the applicant's diagnosis are requested, and additional information is provided to the parent about the PDD Waiver.

If the child is not currently eligible for DDSN services but is screened in as appropriate for PDD services, the parent/legal guardian will be guided through the intake process by the PDD Intake and Referral Screener. The screener will:

- Explain the process for applying for the PDD Waiver and EIBI services.
- Offer a choice of Service Coordination Provider. The screener will inform the parent/legal guardian of all available Service Coordination providers in their county.

- Obtain the name, address and phone number of the child's physicians, teachers, and any other service providers. This information will be used to complete the release of information forms so the child's records can be obtained.
- Assist the family with applying for Medicaid eligibility if the child is not a current recipient.

The screener will then have three (3) working days to mail the family a packet that includes, a self-addressed stamped envelop, and the following documents:

- A letter explaining the enclosed packet.
- The Acknowledgement of SC Choice form along with a list of SC providers for that county.
- A Release of Information form (a separate form for each entity).
- The Pervasive Developmental Disorder Waiver Information Sheet.
- The Early Intensive Behavioral Intervention Service Fact Sheet.

After reviewing the information, the parent/legal guardian must sign the Acknowledgement of Choice form and all Release of Information forms. These documents must be returned to the screener for the process to continue. When the completed documents are received from the parent/legal guardian, the screener will:

- Date stamp all documents.
- Review all documents to assure they have been completed, signed and dated.
- Contact the parent/legal guardian if information is missing or additional information is needed.
- Mail the release forms to the appropriate professional/provider.

Once all requested information has been received from the various professionals/providers who have served the child, the screener will date stamp all documents and conduct a thorough review of all documentation to determine if the records support the Pervasive Developmental Disorder.

If records support that the child has autism, the screener will have five working days to forward to the Service Coordination provider of choice all documents pertaining to the child including a form indicating the presence of autism.

If records support that the child has a PDD other than autism, the screener will have five working days to forward to the Service Coordination provider of choice all documents pertaining to the child including a form indicating the presence of a PDD.

If no records are available or if records are available but insufficient to support that the child has autism or a PDD other than autism, the screener will have five working days to forward to the Service Coordination provider of choice all documents pertaining to the child including a form recommending an evaluation from the Autism Division or another diagnostic entity.

If records do not support that the child has autism or a PDD other than autism, the screener will have three working days confer with the Autism Division for confirmation. If the Autism Division concurs with the screener the process will end. If this occurs, the parent/legal guardian will be informed of their right to appeal per the DDSN/DHHS Medicaid Reconsideration/Appeal Process. If the Autism Division does not concur, the child will continue through the process.

# **Service Coordination**

Each DSN Board and private Service Coordination provider will designate a specific person to receive information from the PDD Intake and Referral Center screener. When the designee receives information, they will complete a record of contact with the date and time the information was received. It will be at the discretion of the provider to assign a specific Service Coordinator. This assignment must be made within three days of receipt of the information from the Intake and Referral Center.

If a child is not currently a consumer eligible for DDSN services but is interested in receiving services through the PDD Waiver, the family will be required to select a Service Coordination provider. Once that selection is made, the designated DSN Board or private Service Coordination provider will receive information from the PDD Intake and Referral Center pertaining to the child. The information received will dictate the specific actions of the Service Coordinator.

If the records received from the PDD Intake and Referral Center support that the child has autism or another PDD, the Service Coordinator will:

- Assist the parent/legal guardian with completing a Service Agreement.
- Assist the parent/legal guardian with completing the application: Request for PDD Waiver Slot Allocation (cover sheet).
- Complete a Service Plan within 45 days.
- Gather all documents necessary for the Consumer Assessment Team (CAT) to complete a LOC (see Level of Care Determination section for specific documents).
- Complete the Request for ICF/MR Level of Care (PDD Waiver) form.

Once the aforementioned tasks have been completed, a packet containing all information will be sent to Vicki Coleman, the current District 1 Waiver Coordinator. Ms. Coleman's office is located on the Whitten Center Campus. Her telephone number is (864) – 938-3520. If no slot is available, the child's name will be placed on a waiting list. When slots become available, the packet of the first child's name from the waiting list will be forwarded to CAT for a LOC determination.

If the PDD Intake and Referral Center did not receive any records or the records received were insufficient for the Intake and Referral Center to make a determination, the Service Coordinator will assist the family with completing the Service Agreement and make a referral to have the child evaluated by the Autism Division or other diagnostic entity of the parent/legal guardian's choice. If, after the evaluation, it is determined that the child does not have autism or another PDD, the process will end. If this occurs, the parent/legal guardian will be informed of their right to appeal per the DDSN/DHHS Medicaid Reconsideration/Appeal Process. If, after the evaluation, it is determined that the child has autism or another PDD, the Service Coordinator will:

- Assist the parent/legal guardian with completing the application: Request for PDD Waiver Slot Allocation (cover sheet).
- Complete a Service Plan within 45 days.

- Gather all documents necessary for CAT to complete a LOC (see Level of Care Determination section for specific documents).
- Complete the Request for ICF/MR Level of Care (PDD Waiver) form.

Once the aforementioned tasks have been completed, a packet containing all information will be sent to Vicki Coleman, the current District 1 Waiver Coordinator. Ms. Coleman's office is located on the Whitten Center Campus. Her telephone number is (864) – 938-3520. If no slot is available, the child's name will be placed on a waiting list. When slots become available, the packet of the first child's name from the waiting list will be forwarded to CAT for a LOC determination.

If a child is currently a consumer eligible for DDSN services and a Service Coordinator contacts a parent/legal guardian concerning the child's participation in the PDD Waiver or the Service Coordinator is contacted by a parent/legal guardian of a child on their active caseload requesting services through the PDD Waiver, the Service Coordinator will:

- Assure the child is age 3 through 10.
- Assure the child was diagnosed with a PDD by age eight. The diagnoses must have come from a licensed diagnostician.
- Assure the child meets Medicaid financial criteria or provides documentation of financial ineligibility for Medicaid.
- Assure that the child meets ICF/MR Level of Care medical criteria (as determined by the DDSN Consumer Assessment Team for this program).

If it is determined that the child meets the target population criteria, the Service Coordinator will:

- Assist the parent/legal guardian with completing the application: Request for PDD Waiver Slot Allocation (cover sheet). This form must be signed by the parent/legal guardian.
- Update the Service Plan.
- Complete the form Request for ICF/MR Level of Care (PDD Waiver) and gather all documents necessary for CAT to complete a LOC (see Level of Care Determination section for specific documents).

Once the aforementioned tasks have been completed, a packet containing all information will be sent to Vicki Coleman, the current District 1 Waiver Coordinator. Ms. Coleman's office is located on the Whitten Center Campus. Her telephone number is (864) – 938-3520. If no slot is available, the child's name will be placed on a waiting list. When slots become available, the packet of the first child's name from the waiting list will be forwarded to CAT for a LOC determination.

# **Level of Care Determination**

The Consumer Assessment Team makes the initial and annual determination of ICF/MR Level of Care. The initial determination is requested by completing the Request for ICF MR/RD Level of Care (PDD Waiver) and forwarding records that support this Level of Care to the Consumer Assessment Team located at the District One Office (8301 Farrow Road; Columbia, SC 29203-3294). The information must include:

- Formal psychological evaluation(s) that includes cognitive and adaptive scores that support a diagnosis of mental retardation or a related disability.
  - If the consumer does not have mental retardation and/or is served in another eligibility category (i.e. related disability), appropriate supportive documentation is required. This may not be a psychological evaluation, but may be, for example, a report from the SCDDSN Autism Division, or appropriate medical, genetic or adaptive assessments.
- Current Single Plan, Individualized Family Service Plan or Family Service Plan. (If a Behavior Support Plan (BSP) is referenced in the consumer's current Single Plan, the packet should include the current signed and dated BSP.)
- Any/all other current (within one year) signed and dated information pertaining to Daily living and other adaptive functioning; Behavior/emotional functioning; and/or Medical and related health needs.

After review, the Consumer Assessment Team may return the request to the Service Coordinator and request that the potential waiver recipient be tested by a SCDDSN approved provider psychologist. The Consumer Assessment Team may also request additional records or reports prior to completing the Level of Care Determination.

When the Level of Care determination has been made, the Consumer Assessment Team will certify that the person does or does not meet ICF/MR Level of Care. This is done by completing the SCDDSN Level of Care Certification Letter and mailing the completed letter, with the procedure for appeals printed on the reverse side, to the applicant or his/her parent/legal guardian, a copy to the Service Coordinator and a copy to the District I MR/RD/PDD Waiver Coordinator, Vicki Coleman. The Consumer Assessment Team is also responsible for providing SCDDSN Central Office with the Level of Care information needed for enrollment. In addition to the Certification Letter, you will receive additional forms (e.g., Level of Care Determination for ICF/MR and Level of Care Staffing Report - MR/RD Form 7) that have been used by the Consumer Assessment Team to determine whether or not ICF/MR Level of Care was met. These forms along with the Certification Letter should be kept in the recipient's file (this information must remain in the file and NEVER be purged).

# Slot Allocation and Enrollment

The District I MR/RD/PDD Waiver Coordinator will review all applications to determine if applicants meet the criteria for enrollment in the PDD Waiver or if they will receive services through the PDD State Funded Program. The Waiver Coordinator will time and date stamp all applications when they are received from CAT.

For those who meet LOC:

• The District I MR/RD/PDD Waiver Coordinator will review the application and Level of Care determination to assure all criteria for the PDD Waiver are met. This review will be completed within 10 working days of the time and date stamp. If the child meets all criteria for enrollment into the PDD Waiver and a slot is available, the District I MR/RD/PDD Waiver Coordinator will complete a Notice of Slot Allotment for the PDD Waiver (PDD Form 5) and forward it to

March 1, 2007

- the MR/RD Waiver Enrollment Coordinator, Celesa Williams. Ms. Williams is located on the Whitten Center Campus. Her telephone number is (864)-938-3292.
- Currently, the MR/RD Waiver Enrollment Coordinator will track this information manually and forward the notice of Slot Allotment to the Service Coordinator.
- The Service Coordinator will:
  - 1. Explain the Freedom of Choice and Right's and Responsibilities forms and assist the parent/legal guardian with completing the appropriate documents.
  - 2. Send a copy of the Freedom of Choice to the MR/RD Waiver Enrollment Coordinator. Once all documentation is received the MR/RD Waiver Enrollment Coordinator will process the enrollment.
  - 3. Once the child is enrolled, the Service Coordinator can request services through the budget approval process.

# For those who do not meet LOC:

- The District I MR/RD/PDD Waiver Coordinator will review the application to assure the child meets all age and diagnostic criteria necessary to receive PDD services, but does not meet Level of Care and/or Medicaid financial eligibility criteria. If this occurs, the child will be awarded a PDD State Funded Program slot if one is available. The District I MR/RD/PDD Waiver Coordinator will complete a Notice of Slot Allotment for the PDD State Funded Program (PDD Form 10) and forward it to the MR/RD Waiver Enrollment Coordinator.
- Currently, the MR/RD Waiver Enrollment Coordinator will track this information manually and forward the notice of Slot Allotment for the PDD State Funded Program to the Service Coordinator.
- The Service Coordinator will explain the Right's and Responsibilities form.

Once the child is enrolled for the PDD Waiver or the PDD State Funded Program, their case must be managed by a Service Coordinator rather than an Early Interventionist. Once the switch occurs, the Service Coordinator will provide the parent/legal guardian with written information concerning the department's abuse and neglect policy and information on selecting an EIBI provider of their choice. Once the selection is made, the budget will be initiated.

# RECEIVING SERVICES

Once the parent/legal guardian has selected an EIBI provider and the child's budget is approved the Service Coordinator can proceed with service authorization.

- The selected EIBI provider will be authorized by the Service Coordinator to complete an EIBI assessment of the child. The assessment should be completed in a timely manner.
- Once the EIBI assessment is completed, copies will be sent to the child's Service Coordinator and the Autism Division.
- The Autism Division will have five working days to review the assessment and other pertinent records to determine the number of line therapy hours that will be authorized for EIBI services.
- When this determination is made, the Autism Division will inform the Service Coordinator in writing. The Service Coordinator will have 5 working days to authorize EIBI Lead Therapy and Line Therapy services for the child.

# **WAITING LIST**

PDD services will be authorized by the DDSN District I Waiver Coordinator on a first-come-first-served basis after all required documents have been completed and submitted and it has been determined that the child has met all the required criteria necessary to receive services through the PDD Waiver or PDD State Funded Program.

The number of qualified children who may be served through the waiver shall be limited only by the availability of funds to pay for the requested services and the waiver cap. The DDSN- Autism Division EIBI Consultant will be responsible for notifying the Waiver Coordinator and the DDSN Budget Office when the resources are getting low.

Applicants who are determined eligible for PDD services that can not be served due to the non availability of funding or waiver cap shall be eligible for placement on a waiting list maintained by DDSN. The date and time all information is received by the DDSN State Waiver Coordinator shall be used to establish the order of an applicant's place on the waiting list.

Once funds become available for PDD services, the Waiver Coordinator will:

- Assure the Case Manager updates all forms and documents.
- Reassess for target population criteria.
- Send the file to CAT for a Level of Care Determination.

# **FUNDING**

The current rate and frequency of EIBI services through the PDD Waiver or state supported PDD services are below. These are the maximum levels of service frequency and rate of pay currently allowed. The Service Coordinator is required to share rate changes with the child's parents/legal guardians.

<b>Early Intensive Behavioral Intervention Services</b>	Rate and Frequency
Case Management	\$122.50/month
One Time Yearly Assessment	\$2,100/year
Plan Implementation	\$60/hour/maximum of 6 hours per month
Lead Therapy	\$30/hour/ maximum of 6 hours per week
Line Therapy	\$14/hour/as determined by DDSN

# EARLY INTENSIVE BEHAVIORAL INTERVENTION PROVIDERS

#### **Provider Services**

This service has four distinct components: (1) Assessment, Program Development and Training, (2) Plan Implementation, (3) Lead Therapy Intervention, and (4) Line Therapy.

- 1. Assessment, Program Development and Training: Provided by the EIBI Consultant
  - Completion of adaptive assessments (Assessment of Basic Language and Learning Skills, Peabody Picture Vocabulary Test III, and Vineland);
  - Development of an EIBI plan;
  - Completion of a functional behavior assessment and a behavioral support plan if challenging behaviors persist; and
  - Training key personnel to implement interventions.
- 2. Plan Implementation: Provided by the EIBI Consultant
  - Implementation of the EIBI plan;
  - Educating family, caregivers and/or service providers concerning strategies and techniques to assist the participant in behavior reduction and skill acquisition;
  - Monthly monitorship of the effectiveness of the EIBI plan;
  - Modifying the EIBI plan as necessary; and
  - Updating initial assessments and modifying the plan as necessary.
- 3. Lead Therapy Interventions: Provided by the Lead Therapist
  - Assuring the EIBI plan is implemented as written;
  - Weekly monitoring the effectiveness of the EIBI plan;
  - Reviewing all recorded data;
  - Providing guidance to and supervision of the Line Therapist;
  - Receiving family/caregiver feedback; and
  - Assuring coordination and continuity with other programs and services.
- 4. Line Therapy: Provided by the Line Therapist
  - Receiving family/caregiver feedback; and
  - Assuring coordination and continuity with other programs and services
  - Implement interventions designed in the EIBI plan;
  - Records data and reports concerns and progress to the Lead Therapist.

# **Becoming a Qualified Provider**

Individuals who wish to be a provider of Early Intensive Behavioral Intervention services as an Applied Behavior Analysis Consultant must successfully complete the initial approval process. The initial approval process consists of the Submission of Required Credentials, the Submission of a Work Sample and a Personal Interview. DDSN will designate a team to approve of individuals who apply as Applied Behavior Analysis Consultants under the PDD Waiver/PDD State Funded Program.

# **Provider Responsibilities**

Individuals or entities that become approved providers of Early Intensive Behavioral Intervention (EIBI) services under the PDD Waiver/PDD State Funded Program are responsible for complying with the following:

#### 1. Personnel

- EIBI providers will be responsible for but not limited to recruiting, selecting, retaining and terminating employees. This responsibility extends to the hiring of staff at all levels of service. As such, providers are to assure that each employee meets the requirements for the position in which they serve and be able to present documentation of their credentials and evidence of meeting stated requirements. To verify this, DDSN will randomly select and review provider employee records at least annually. Documentation of all reviews will be maintained.
- EIBI providers will be allowed to sub-contract with personal care agencies or similar entities to employ Line Therapists. This process must be approved by DDSN and all sub-contracts must be made available to DHHS upon their request. Providers must assure that Line Therapists employed through sub-contracts meet all required personnel standards.
- 2. Complaints, critical incidents, including accidents, suspected abuse, neglect or exploitation and criminal activity.
  - The ABA Consultant shall maintain a log of all complaints and critical incidents which shall include documentation of the resolution of the complaint or incident.
  - The ABA Consultant shall communicate any critical incident to the Director of the Division of Quality Management via fax (803-898-9660) within one business day.

# 3. Data Management

The ABA Consultant will be required to submit to the child's Service Coordinator and the Autism Division the following information within the timeframes specified:

- Progress reports: must be submitted monthly and demonstrate/document that drills are conducted as scheduled
- Data reports: must be submitted quarterly and contain cumulative graphs of target areas demonstrating progress or areas of concern
- Assessment of Basic Language and Learning Skills (ABLLS): must be submitted semiannually per the initial assessment date
- Peabody Picture Vocabulary Test (PPVT) and Vineline: must be submitted annually per the initial assessment date

# SERVICE COORDINATOR RESPONSIBILITIES

Those providing Service Coordination must follow DDSN standards for Service Coordination. In addition, Service Coordinators are responsible for the collection and reporting of summary and consumer specific data including, but not limited to: intake and referral services provided by the agency, waiver eligibility determination, care planning, service authorization and termination, and fiscal accountability.

# Service Coordinators shall maintain case records in accordance with the following:

- 1. Case records shall be maintained for any child who receives EIBI services through the PDD Waiver or State Funded Program.
- 2. Case records shall contain:
  - Identifying information, including the child's Medicaid identification number (if applicable) and social security number.
  - Documentation of the date on which the child's referral was first received and dates of all actions taken thereafter.
  - Documentation of all assessment and target population criteria outcomes.
  - Documentation of all Case Management activities, the monitoring of service delivery, and service effectiveness.
  - Identifying information referencing the child's parent(s) and/or legal guardian.
  - Documentation that all Department required forms have been completed to include the required signatures.
- 3. The Service Coordinator shall protect the confidentiality of all children and recipient records in accordance with DDSN policy and the requirements of the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

# The Service Coordinator shall assure that each child's parent/legal guardian:

- Is fully informed of his/her rights and responsibilities
- Participates in the development and approval of the plan and is provided a completed copy.
- Is given a choice of service providers from qualified providers in the state.
- Is fully informed of and given access to a uniform complaint system as defined by the Department.

At least annually, the Service Coordinator shall conduct a consumer satisfaction survey which consists of surveying a sample of consumers selected by the Department to determine their level of satisfaction with services provided by the Service Coordinator.

- The random sample of children shall include ten consumers or ten percent of the Service Coordinator's average monthly service caseload, which ever is higher.
- If the average caseload is less than ten consumers, all consumers shall be included in the survey.

- The consumer satisfaction survey shall be on a Department approved form.
- The results of the consumer satisfaction survey shall be made available to the Department.

Service Coordinators must provide a monthly contact with the EIBI service provider and/or family. On a quarterly basis, there must be a review of the entire waiver plan of care which includes the most recent EIBI service provider quarterly progress report and a contact with the participant's family. If progress towards established goals does not meet expectations, then consultation with DDSN will occur. On an annual basis, there must be a face-to-face contact with the family.

# SERVICE REQUIREMENTS/LIMITATIONS/EXCLUSIONS

- 1. Only those services described in this document will be reimbursable using PDD funds.
- 2. The cost of travel time is included in the rate paid to the providers of these services.
- 3. All interventions funded through this pilot project must be directly related to an individual child's therapeutic goals. Therapeutic goals must be related to the child's diagnosis of PDD to include autism and Asperger's Syndrome.
- 4. This waiver will permit behaviorally-based therapy models consistent with best practices that are research based and peer reviewed.
- 5. The EIBI service is limited to children who have been diagnosed with a pervasive developmental disorder as defined in the most recent addition of the Diagnostic and Statistical Manual of Mental Disorders of the American Psychiatric Association and who meet the ICF-MR level of care criteria. In order to accept a qualified diagnosis from a licensed or certified diagnostician there must be conclusive written documentation in the individual's file which provides a detailed report of the assessments and evaluations leading to the diagnosis, the diagnostic tools used to reach the diagnosis, and any other narrative, tests, and medical reports used by the diagnostician to render his/her diagnosis of the child.
- 6. Services are limited to three years, either contiguous or intermittent, and are available to children ages three through ten with a confirmed diagnosis by the child's eight birthday. Children must be at least three years of age before application is made for PDD services and services must be completed before the child reaches his or her 11<sup>th</sup> birthday.
- 7. Waiver applicants will be admitted to the waiver after they meet all criteria for enrollment contingent upon available funding and waiver slots. If there are not sufficient slots for all applicants, applicants will be admitted based upon the date of their application.
- 8. The annual cost of benefits per child shall not exceed \$50,000 or available funds, whichever is less.
- 9. The level of service (i.e. the number of hours per week) each child receives is based on a DDSN review of relevant assessments, documentation and instructional environments. The agency will make the final determination on the number of service hours each child receives. However, if a child's condition changes (e.g. no progress being made, new aberrant behavior is noted) and can be supported by documentation, the Service Coordinator can submit a request for an increase in service hours, not to exceed the maximum service limits specified in the PDD Waiver.
- 10. Children will receive no more than eight hours of line therapy per day.
- 11. Therapy hours that are missed during a week shall not "roll over" or be carried forward as a balance to be used the following week or at any time in the future.

- 12. Services may be delivered in the child's relevant natural environments which may include but are not limited to the child's home or community locations directly related to the child's therapeutic goals. Delivery of these services may be deemed appropriate by the child's team based on the child's strengths and challenges. However, at no time will services be rendered where or when educational services are being provided.
- 13. The therapeutic goals must be implemented on a face-to-face basis with the child. Parents or guardians are required to be present at team meetings and workshop sessions and must be trained in all therapeutic procedures and be active contributors to their child's program to carry over and reinforce targeted behaviors and skill learning. The parents or guardians do not need to be on site for all therapy sessions; however, they must meet with the Line Therapy supervisor weekly.
- 14. Once children have had three years of intensive services, or at such time that they are not making progress towards identified goals, recommendations will be made to other home and community based services. There may be circumstances that prevent immediate receipt of these services (e.g. waiting lists or unavailability of funds).
- 15. The use of PDD waiver services is exclusive of the other home and community-based waiver services. Children can participate in only one South Carolina home and community based Medicaid waiver program at a time.
- 16. In an effort to maximize utilization of dollars and serve more children:
  - Children in the PDD State Funded Program cannot receive other DDSN services or waivers.
  - Children who meet Medicaid criteria will be expected to participate in the waiver if all other required criteria are met. No children who meet the Medicaid criteria can participate in the PDD State Funded Program, unless funding is available AND no waiver slots are available.
  - All participants in the PDD State Funded Program must be ruled ineligible for Medicaid or not meet ICF/MR Level of Care prior to receiving services through the PDD State Funded Program.
- 17. Parents/legal guardians reserve the right to choose their child's EIBI provider. However, a change in service providers does not mean that additional assessments will be authorized.
- 18. The use of restraints by EIBI providers is explicitly prohibited.